# commerce.wi.gov

## **Credential Application**

Remit to: **State of Wisconsin Department of Commerce-Credentialing** P.O. Box 78780 Milwaukee WI 53293-0780

Phone (608) 261-8467

TDD #: (608) 264-8777 7:45 a.m. - 4:30 p.m. E-mail: madisoncred@commerce.state.wi.us

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

#### THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU:

- Sign and date this form;
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- Attach the specified fee; and
- Attach documents if specified on this application.

**Instructions:** Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. Be certain to sign and date the application. The applicant's social security number is mandatory information. Make a photocopy of the completed application for your records.

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats. But they may not be disclosed to anyone except other State of Wisconsin governmental agencies.

Applicant Information	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, E-mail Address:	
Applicant's Signature	Date (mo/day/yr)

Send application and payment to: State of Wisconsin, Department of Commerce-Credentialing, P.O. Box 78780, Milwaukee, WI 53293-0780

Overnight mail delivery and Office location: State of Wisconsin, Department of Commerce-Credentialing, 201 W. Washington Ave., Madison, WI 53703

All other correspondence: Wisconsin Department of Commerce, Safety & Buildings Div., P.O. Box 7082, Madison, WI 53707

#### MASTER ELECTRICIAN CERTIFICATION-cost code 7631

### **Application and Exam Fee (nonrefundable):** class code 7631

Make checks payable to: Department of Commerce. The fee consists of a \$35 application fee and an exam fee of \$30. When the exam is passed, the applicant will be asked to pay a \$200 credential fee which will be prorated because the credential expires on a specific date. The credential, which will be issued after the exam is passed and the prorated credential fee paid, will be effective for 4 years from June 30<sup>th</sup>. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

A person holding a master electrician certification may apply without examination for a commercial electrical inspector certification.

**Reason for Credential:** A person who holds a credential issued by the department as a certified electrical contractor, certified electrical contractor-restricted, certified master electrician, certified journeyman electrician or certified beginning electrician may perform electrical construction work in a municipality which requires licensure to perform electrical work pursuant to s. 101.87 (2) to (4), Stats., and in accordance with local ordinances. Chapter Comm 5 establishes a statewide certification of electricians in various classes, master, journeyman and beginning, recognizing their knowledge and abilities. When an electrician certification is required and what category of certification is needed are determined by individual municipalities.

**Requirements of Credential:** No person may advertise as a certified electrical contractor, certified master electrician, certified journeyman electrician or certified beginning electrician unless the person holds the appropriate credential. A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.

**Qualifications for Examination:** A person applying for a master electrician certification examination shall have at least 1,000 hours per year of experience for at least 7 years in electrical construction work. If a person has successfully completed semesters in a school of electrical engineering or other accredited college, university, technical or vocational school in an electrical-related program, the applicant may claim 500 hours of experience for each semester up to a total of 3,000 hours and 3 years toward the required experience.

If the experience you gained spanned more than 12 consecutive months use a separate row for each 12 month period. The Time Period does not have to be consecutive years from one row to the next. In the Time Period column fill in the beginning month and year and the ending month and year in which the experience hours were completed. In the Experience Hours column fill in the number of hours claimed for that time period but do not record more than 1000 hours in the column even if you worked more than 1000 hours. If the hours were witnessed by more than one person, the hours witnessed by each person must be filled in on separate rows. Photocopies of this page may be made if you need additional room or would like to mail to witnesses to sign. The witness must have observed or had knowledge of the number for work hours performed in electrical construction. Electrical construction means the installation of electrical wiring. Electrical construction does not include the maintenance, repair or fabrication of electrical equipment or the installation of electrical wiring and equipment covered by ch. PSC 114.

Time Period					
Began	Ended	Experience	Hours Witnessed by		Telephone Number of Witness
Month/Yr	Month/Yr	Hours	(please print or type)	Signature of Witness	of Witness

For each semester in a school of electrical engineering or an electrical-related program, specify the beginning and ending date of the semester, record 500 hours of experience, write the name of the school, and **ATTACH** a copy of the official transcripts from the school to this form. Photocopies of transcripts will not be accepted. No experience hours should be recorded if official transcripts are unavailable. This must be full-time schooling, not part time or evening classes.

Time Period			
Began	Ended	Experience	
Month/Yr	Month/Yr	Hours	Name of School

In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover information contained in chapters Comm 5 and Comm 16 (Electrical Code-Vol. 2), Wisconsin Administrative Code and the 2005 National Electrical Code. The exam is open book. Copies of current Wisconsin Administrative Codes may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253. Copies of current National Electrical Codes may be purchased from the National Fire Protection Association @ (800) 344-3555.				
<b>Scheduling 2008 exams:</b> S&B offers exams on Saturday once each month in 14 cities and on specific week days in 4 cities. To schedule an exam:				
• Choose a city and put a check mark behind the date you would like to take the exam. Record a telephone number where you can be reached during the day in case that exam is filled.				
<ul> <li>Submit the fee and this application to the division at least 30 days in advance of the exam date chosen. Keep a copy of this application for your records.</li> </ul>				
<ul> <li>If special accommodations are needed, contact Safety and Buildings, 608-261-8467, prior to submitting your application.</li> <li>You will receive a letter from S&amp;B when division staff process your exam request. You will receive a second confirmation letter about a week before the exam date for those cities and dates that are shown below without a location noted.*</li> </ul>				
* The Department of Commerce, Safety and Buildings Division, is partnering with the state Office of State Employee Relations (OSER) to offer exams on the second Saturday of each month in 14 different cities. Exams follow the same rules as the exams				
proctored by Safety and Buildings staff. The specific exam location, which changes due to varying numbers of registrants, will be confirmed for attendees in a letter from OSER about one week before the exam. Contact OSER with any questions after receiving the				
final confirmation letter, by phone, 608-267-1013 or email <u>wicertexams@wisconsin.gov</u> .				
Exam Name: This is a 4-hour exam MASTER ELECTRICIAN				
Daytime Phone Number:				
Weekday Exams				
Eau Claire - Ramada Center, 205 S. Barstow St., 715-835-6121 August 20 September 17 October 15 O				
Green Bay - Hotel Sierra, 333 Main St, 920-432-4555 August 13 ☐ October 9 ☐				
<b>Pewaukee</b> - Waukesha County Technical College, 800 Main St, 262-695-3474 September 10 □ October 22 □ November 11 □				
Saturday Exams				
Ashland - A letter confirming the date, time and specific location will be sent to you.*  September 13  October 11  November 8  December 13				
Eau Claire - A letter confirming the date, time and specific location will be sent to you.*  September 13  October 11  November 8  December 13				
Fond Du Lac - A letter confirming the date, time and specific location will be sent to you.*  September 13  October 11  November 8  December 13				
Green Bay - A letter confirming the date, time and specific location will be sent to you.*  September 13 □ October 11 □ November 8 □ December 13 □				
<b>Kenosha</b> - A letter confirming the date, time and specific location will be sent to you.* September 13 □ October 11 □ November 8 □ December 13 □				
La Crosse - A letter confirming the date, time and specific location will be sent to you.*  September 13  October 11  November 8  December 13				
Madison - A letter confirming the date, time and specific location will be sent to you.* September 13 □ October 11 □ November 8 □ December 13 □				

**Milwaukee** - A letter confirming the date, time and specific location will be sent to you.\* September 13 ☐ October 11 ☐ November 8 ☐ December 13 ☐

**Platteville** - A letter confirming the date, time and specific location will be sent to you.\* September 13  $\square$  October 11  $\square$  November 8  $\square$  December 13  $\square$ 

Rhinelander - A lett September 13		blocation will be sent to you.*  December 13
<b>Rice Lake</b> - A letter September 13 □		December 13 December 13
<b>Superior</b> - A letter of September 13 □		cation will be sent to you.*  December 13
Wausau - A letter conseptember 13 □		ation will be sent to you.*  December 13
Wisconsin Rapids - September 13		pecific location will be sent to you.*  December 13

**Education Hours Required to Renew:** The renewal of a master electrician certification shall be contingent upon the master plumber obtaining at least 24 hours of acceptable continuing education three months prior to the expiration date of their credential. A person who holds a license as a master electrician may apply to the department for waiver of the continuing education requirements on the grounds of prolonged illness or disability or similar circumstances. Each application for waiver shall be considered individually on its merits by the department.